

2018-245-T
286325

ACCEPTED FOR PROCESSING - 2018 November 28 7:30 AM - SCPSC - 2018-245-T - Page 1 of 1

CLASS C AMENDMENT FORM

Mail or Fax a copy of this form to:

Public Service Commission of South Carolina
Clerk's Office
101 Executive Center Dr., Ste 100
Columbia, S.C. 29210

PHONE (803) 896-5100
FAX (803) 896-5199

Need Assistance with completing the Form?

SC Office of Regulatory Staff
Transportation Department

PHONE: (803) 737-0800

RECEIVED

NOV 27 2018

PSC SC
CLERK'S OFFICE

DATE: 11-27-18

I have the following Certificate:

☐ Class C Taxi # _____ ☐ Class C Charter # _____ ☐ Class C Charter Bus # _____
☒ Class C Non-Emergency # 9386 ☐ Class C Stretcher Van# _____

Please consider this as my request for the following amendment(s) to my Certificate:

☐ Name Change

From: _____ DBA: _____
(Current Name) (Current DBA if applicable)

TO: _____ DBA: _____
(New Name) (New DBA if applicable)

☒ Scope of Authority

From: COUNTIES IN SC To: STATEWIDE AUTHORITY
(Current Scope) (New Scope)

☐ Passenger Limit

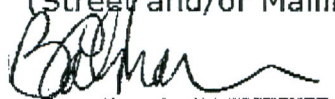
From: _____ To: _____
(Current Limit Number) (New Limit Number)

TRANSITSOUTH LLC
(Name & DBA if DBA is applicable)

BEAUFORT SC 29906
(City, State, Zip Code)

843-321-3210
(Telephone Number)

69 ROBERT SMALLS PKWY STE 2F
(Street and/or Mailing Address)


(Signature)

PRESIDENT
(Title) Owner, President, etc.

Revised 8-20-15